## FEC FORM 3X

## REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

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TYPE OR PRINT ▼

Example: If typing, type

12FE4M5FFC MAIL CENTER

COMMITTEE (in full)		over the lines.		MEGENTER
EMPIONE RIJNG	EACH CO	MMUNICHY PAC	, 7	
	11111			
ADDRESS (number and street)	15,5,3,9 Wi	SICIOINIS, IN AIVE	ANUE SULLITIE	1,1,2,0,9,
Check if different			<del></del>	
than previously reported. (ACC)	1c, H, e, V, Y, , C	h, A, S, E	1 Md 2,0,8	15-
2. FEC IDENTIFICATION NU	IMBER ▼	CITY	STATE A	ZIP CODE A
C 6. 0.4.2.6,1.	2,2	3. IS THIS NEW (N)	OR AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2) May 20	(M5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reparts:	Due On:	Mar 20 (M3) Jun 20	(M6) Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (C	(C) 12-Day	Second .	(M7) Oct 20 (M10)  General (12G)  Special (12S)	Jan 31 (YE)
October 15 Quarterly Report (C January 31 Year-End Report (Y		Election on	] / [	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elect		Runoff (30R)	Special (30S)
Termination Report (TER)		Election on	/ ********	in the State of
5. Covering Period	1 0,1 2,0	through	06'30'20	1.3
I certify that I have examined th	is Report and to the bo	est of my knowledge and belief it	is true, correct and comple	te.
Type or Print Name of Treasure	Thomas A	1. Gentile		
Signature of Treasurer	Nwna	a. Sentell	Date 0.7 0	1 2013
<del></del>	eous, or incomplete infor	mation may subject the person sig	ning this Report to the penalt	ies of 2 U.S.C. §437g.
Office Use Only			L .	FORM 3X Rev. 12/2004